Application For Employment

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

(PLEASE PRINT)

		(-	LEASE I KINI)			
Position (s) Applied For				Date of Ap	plication
How Did Y	You Learn About Us?				•	
	Advertisement		Relative		Inquiry	
	Employment Agency		Friend		Other	
Last Nam	e		First Name		Mido	ile Name
Address			City	/ State	e Zip G	Code
Daytime	Telephone Number			Best time to o	contact you	
required p	e under 18 years of age, can year proof of your eligibility to wo	rk? n us befor				□ No
Have you	f Yes, give date ever been employed with us f Yes, give date	before?			Yes	□No
Do any o	f your friends or relatives, oth	er than sp	oouse, work here?		Yes	□No
Are you	currently employed?				Yes	□No
May we	contact your present employer	?			\BYes	□No
	prevented from lawfully become		loyed in this			
2	ecause of Visa or Imigration Proof of citizenship or immigration		ill be required upon em	ployment	\Bullet Yes	□No
Date avai	lable for work/	/				
Are you a	available to work:	Full Ti	ime Part Ti	me	porary Season	al
Are you	currently on "lay-off" status a	nd subjec	t to recall?		Yes	□No
Can you	travel if a job requires it?				Yes	□No
•	ever been convicted of a felo ecord does not constitute an automatic be	•	` , ,			□No

Education

	Name and Address of School	Course of Study	Years Completed	Diploma Degree
Elementary School				
High School				
Undergraduate School				
Graduate Professional				
Other (Specify)				,
D		.1.:11	1	
Describe any	y specialized training, apprenticeship,	skins, and extra-curri	cular activities	·•
Describe any	y job-related training received in the U	nited States military.		

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1.	Employer Telephone Number (s) Supervisor		Address		
			Job Title		
			Reason for Leaving		
	Dates	Employed	Work Performed		
	From	То			
2.	Employer		Address		
	Telephone Number (s)		Job Title		
	Supervisor		Reason for Leaving		
	Dates Employed		Work Performed		
	From	То			
3.	Employer		Address		
3.	Employer Telephone Numb	per (s)	Address Job Title		
3.		per (s)			
3.	Telephone Numb	Der (s) Employed	Job Title		
3.	Telephone Numb		Job Title Reason for Leaving		
3.	Telephone Numb Supervisor Dates	Employed	Job Title Reason for Leaving		

List professional, trade, business, or civic activities and offices held. You may exclude membership which would reveal race, religion, national origin, age, ancestry, disability or other protected status

Additional Information

Other Qualificat	<u>cions</u>	
Summarize specia	al job-related skills and qua	lifications acquired from employment or other experience.
Control Chill		
Specialized Skill Cheek Skills/Eau		A D
Check Skills/Equ	ipment Operated	Any Equipment / Tools Used (List)
Terminal	Spreadsheet	
PC/MAC	Word Processing	
WPM	Shorthand	
	_	
State any addition	nal information you feel yo	may be helpful to us in considering your application.
		QUESTION UNLESS YOU HAVE BEEN INFORMED B FOR WHICH YOU ARE APPLYING.
, I		manner, with or without a reasonable accommodation, the
	n the job or occupation for upation has been given.	which you have applied? A review of the activities involved Yes No
References		
1.) Name:	Address:	Phone #:
2.) Name:	Address:	Phone #:
3.) Name:	Address:	Phone #:

Applicant's Statement

I certify that the answers given herein are true and comp	lete.
I authorize investigation of all statements contained in the in arriving at an employment decision.	nis application for employment as may be necessary
This application for employment shall be considered act Any applicant wishing to be considered for employment whether or not applications are being accepted at that tir	beyond this time period should inquire as to
I hereby understand and acknowledge that, unless otherwill relationship with this organization is of an "at will" naturally any time and the Employer may discharge Employee at understood that this "at will" employment relationship in by conduct unless such change is specifically acknowled organization.	anytime with or without cause. It is further nay not be changed by any written document or
In the event of employment, I understand that false or m or interview(s) may result in discharge. I understand, al regulations of the employer.	
Signature of Applicant	Date